



5-21-07

JFW

PTO/SB/21 (07-06)

Approved for use through 03/31/07. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Please type (+) plus sign (+) inside this box → ☐

The Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/527,786	
	I.A. Filing Date	September 15, 2003	
	First Named Inventor	Kang Ting	
	Group Art Unit	1635	
	Examiner Name	Richard A. Schnizer	
Total Number of Pages in This Submission	14	Attorney Docket Number	39370.00005


ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization	<input type="checkbox"/> Assignment & Recordation Cover Sheet (in duplicate)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Postage Paid Return Postcard	<input type="checkbox"/> Drawing(s) Formal ___ Sheet with Submission of Drawings Transmittal (1 page) (in duplicate)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Response to Office Action (11 pages)	<input type="checkbox"/> Issue Fee Transmittal with PTO-85b (in duplicate)	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> Amendment Transmittal Letter (in duplicate) (2 pages)	<input type="checkbox"/> Request for Continued Examination Transmittal (RCE)	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Request For Corrected Filing Receipt & copy of Filing Receipt showing correction	<input type="checkbox"/> Request for Status of Application
<input type="checkbox"/> Petition for Extension of Time (month) (1 page) (in duplicate)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Information Disclosure Statement (in duplicate) with Form PTO-1449 citing ___ References	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Express Mail Label No. EV 889 008 985 US	<input type="checkbox"/> Request for Refund	
<input checked="" type="checkbox"/> Certificate of Mailing	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Requirements under 35 USC 371 (2 pages) (in duplicate)		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Zhaoyang Li, Ph.D., Reg. No. 46,872
Signature	
Date	May 18, 2007

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: May 18, 2007			
Typed or printed name	Yayoi Barrack		
Signature		Date	May 18, 2007

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 39370.00005	
Applicant(s): Kang Ting					
Serial No. 10/527,786	MAY 18 2007	A. Filing Date September 15, 2003	Examiner Richard A. Schizer	Group Art Unit 1635	
Invention: NELL-1 Enhanced Bone Mineralization					
TO THE COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as show below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	39	41	0	X \$50.00	\$00.00
INDEP. CLAIMS	5	6	0	X \$200.00	\$00.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$00.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$00.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> - Please charge Deposit Account No. 07-1850 in the amount of \$ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> - A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of any necessary fees associated with this communication or credit any overpayment to Deposit Account No. 07-1850 A duplicate copy of this sheet is enclosed. <input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 C.F.R. 1.17.					
Dated: May 18, 2007 Squire, Sanders & Dempsey L.L.P. 1 Maritime Plaza, Suite 300 San Francisco, CA 94111 (415) 954-0200 cc: Docket:			 _____ Zhaoyang Li, Ph.D. Reg. No. 46,872		



Express Mail Label No. EV 889 008 985 US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Examiner:

R. A. SCHNIZER

Kang Ting

Serial No.: 10/527,786

Art Unit:

1635

Filed: September 28, 2005

I.A. Filing Date: September 15, 2003

Title: *NELL-1 ENHANCED BONE MINERALIZATION*

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Amendment and Response to Office Action

Dear Examiner Schnizer:

This response addresses the Office Action mailed on February 23, 2007.